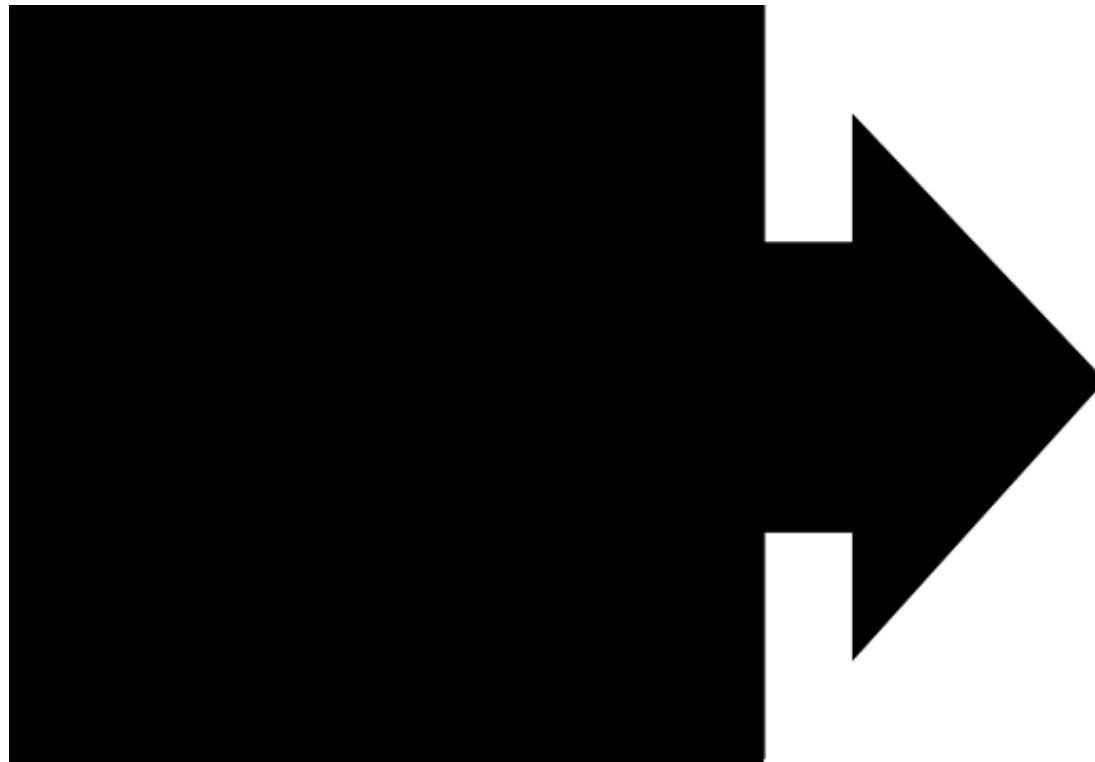


Chapter 5

Complete an Evaluation



Introduction

Are we there yet?

The answer to that question can only be yes...and no. You have implemented your program, and documented the process on your action plans. You have measured and documented your immediate and intermediate outcomes and have used all this evaluation data for ongoing program feedback and improvement. In short, your evaluation has been a continuous process. Yet, you are not finished, because your evaluation of long-term outcomes is the linchpin in PATHWAYS.

Communities and funders today want results. They want *outcomes*. You want to demonstrate that your program(s) or intervention(s) works. You want to show that the changes taking place are meaningful and do justice to your efforts. If meaningful outcomes were elusive, you found out why. You have gone back to your needs and resources assessment, reviewed your underlying conditions, and/or examined readiness factors as they relate to your organization, defined population, or community. You have thought through the entire process quite systematically, using your logic models and action plans to remeasure the steps you have taken. You have used your evaluation team according to their strengths and skills. What have you missed? Are there competing factors that diminish your ability to succeed?

Appropriate, comprehensive outcome evaluation combines outcome data with an understanding of the process that leads to the achievement of those outcomes. This type of evaluation starts with the premise that every initiative is based on a theory, or theories—some thought process about how and why it will work. The theory can be either explicit or implicit. The theory of how your initiative works helps you identify your expected immediate and intermediate outcomes (objectives) that, if successfully achieved, will lead toward measurable changes in the general substance abuse problem that was your initial concern—your goal. (See chapter 1 for more on developing your theory of change.)

The good news is that if you followed the process outlined in PATHWAYS, you have already documented some measurable outcomes. You have empirical evidence that what you are doing is accomplishing what

When Implemented, the ACHIEVING OUTCOMES Process Will:

- Help you figure out what is working, what is not working, and why.
- Show behavioral change in factors or conditions associated with substance abuse or resistance to it.
- Result in substance abuse prevention and/or reduction.

you intended, and you are well prepared to conclude your program and complete the last module in this process successfully.

Carrying out a credible and useful evaluation is demanding. Local service providers and coalitions generally do not employ in-house evaluation staff. Spending scarce resources to purchase evaluation services is a difficult choice. However, to the extent that you use the outcomes-oriented approach recommended in this publication to engage in evaluation tasks, you will have minimized both your reliance on, and the cost of, outside evaluation.

Your ability to shepherd a well-executed evaluation is not only beneficial to your program, organization, or coalition, but also to the larger field of prevention practice. The prevention field needs to add to its database of promising approaches, innovations, and adaptations. This is done through the knowledge-based experiences of service providers and coalitions. Each provider of prevention services who engages in systematic evaluation contributes to the field as a whole.

PATHWAYS is an evaluation process from start to finish. Your completed logic models and accompanying action plans should be an excellent outline for your final evaluation report if you are an individual service provider or one of several service providers functioning as part of a coalition or other group effort. If you are a group effort, the logic models and action plans of each coalition partner or member of your group, when added to your own, provide you with the substantive material you need for a comprehensive evaluation. Of course, this entire evaluation process began with needs assessment (setting up baseline measures) and went into full gear during the program implementation phase when you began to document your immediate and intermediate outcomes. For those coalitions that come together to share progress and outcomes from consistently maintained data, sharing evaluation as well as final reports can contribute much to the ongoing discussions concerning promising innovations, fidelity, and adaptation, as well as being useful in making the case to funders and achieving sustainability.

Important Terms

Baseline Data: The initial information collected prior to the implementation of a program, against which outcomes can be compared at strategic points during and at completion of a program.

Immediate Outcome: The initial change in a sequence of changes (from baseline) expected to occur as a result of implementation of an evidence-based program.

Impact: The long-term change effected by the program(s) on the conditions described in baseline data.

Intermediate Outcomes: In a sequence of changes expected to occur in a program, the changes that are measured subsequent to immediate change, but prior to the long-term changes that are measured at program completion. Depending on the theory of, or pathway to, change guiding the program, an intermediate outcome in one program may be an immediate or long-term outcome in another.

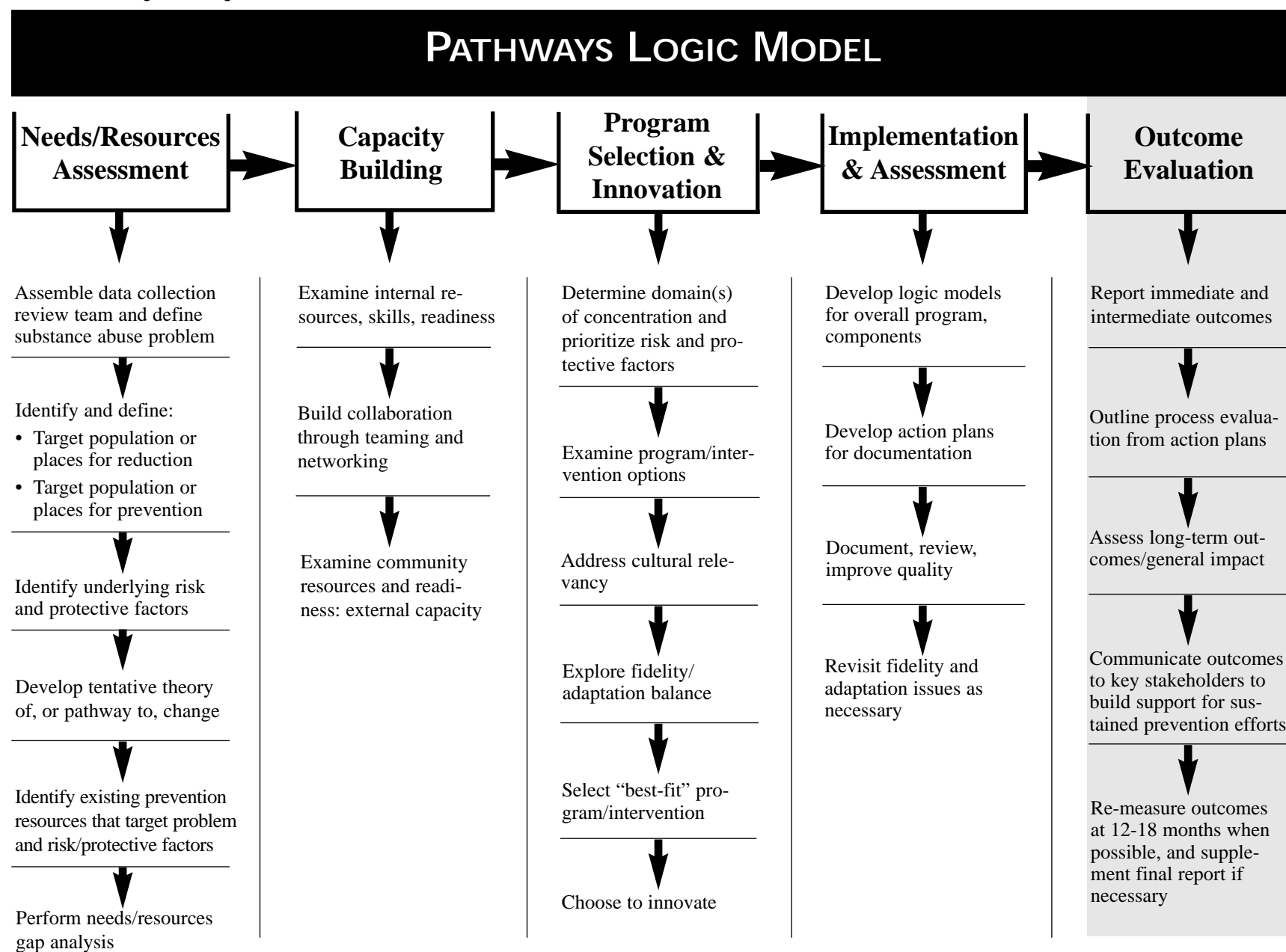
Long-term Outcomes: Over time, the change(s) that result from the program or intervention,

Outcomes: The extent of change in targeted attitudes, values, behaviors, or conditions between baseline measurement and subsequent points of measurement. Depending on the nature of the program and the theory of, or pathway to, change guiding it, changes can be immediate, intermediate, and long-term outcomes.

Process Measures: Measures of participation, “dosage,” staffing, and other factors related to implementation. Process measures are *not* outcomes, because they describe events that are inputs to, or throughputs of, the delivery of a program.

Sustainability: The continuation of a program over a period of time, especially after grant monies disappear.

PATHWAYS Program Logic Model



Logic Model Discussion for Evaluation

The program logic model on the previous page shows how the evaluation component (the shaded column) fits into the overall framework for PATHWAYS. The activities and tasks that make up the program evaluation component are described below.

Complete Evaluation Action Steps

- **Report Immediate and Intermediate Outcomes**
 - Assemble immediate outcomes for final report
 - Assemble intermediate outcomes for final report
- **Outline Process Measures**
 - Assemble action plan data relative to process measures
- **Measure Long-term Outcomes**
 - Document change(s) compared to baseline measures of general substance abuse problem
 - Determine program sustainability and follow-up actions
 - Produce final report and share findings
- **Communicate Outcomes to Key Stakeholders**
- **Re-Measure Long-term Outcomes**
 - Re-measure outcomes at 12 and 18 months if possible
 - Supplement your report to the community with these longer-term outcomes

Why Evaluate?

To Gain Insight

- Assess needs, desires, and resources of community members.
- Identify barriers to, and facilitators of, service use.
- Learn how to describe and measure program activities and effects.

To Affect Participants

- Reinforce program messages.
- Stimulate dialogue and raise awareness regarding health issues.
- Broaden consensus among coalition members regarding program goals.
- Teach evaluation skills to staff and other stakeholders.
- Support organizational change and development.

To Assess Effects

- Assess skills development by participants of the program.
- Compare changes in provider behavior over time.
- Compare costs with benefits.
- Find out which participants do well in the program.
- Decide where to allocate new resources.
- Document the level of success in accomplishing objectives.
- Demonstrate that accountability requirements are fulfilled.
- Aggregate information from several evaluations to estimate outcome effects for similar kinds of programs.
- Gather success stories.

To Change Practice

- Refine plans for introducing a new service.
- Characterize the extent to which program plans were implemented.
- Enhance the cultural competence of your program.
- Verify that participants' rights are protected.
- Set priorities for staff training.
- Make mid-course adjustments to improve client flow.
- Improve the clarity of communication messages.
- Determine if customer satisfaction rates can be improved.
- Mobilize community support for the program.

From Center for Disease Control. *Framework for program evaluation in public health*, 1999.

Understanding the Levels of Outcomes

While each program is unique, outcomes can be accounted for at three distinct stages:

- *Immediate Outcomes:* The initial changes in a sequence of changes expected to occur in an evidence-based program.
- *Intermediate Outcomes:* In a sequence of changes expected to occur in an evidence-based program, the changes that are measured subsequent to immediate change, but prior to the changes that are measured at program completion. Depending on the theory of, or pathway to, change guiding the intervention, an intermediate outcome in one intervention may be an immediate or longer-term outcome in another.
- *Long-term Outcomes:* Over time, the change(s) that result from the program or intervention,

The long-term effects of the outcomes on the conditions described in baseline data are known as *impacts*.

Measuring Outcomes

Immediate and Intermediate Outcomes

Immediate and intermediate outcomes are the changes between baseline (measurement of your defined population's risk and protective factors before selecting and implementing a program), and the measurements taken of those same underlying factors at completion of each of the components. Using the same instruments you used to measure the baseline for the underlying conditions for your defined population or area of interest, re-measure upon completion of the component that addresses the condition. Your action plans, which you developed during the implementation phase (see chapter 4), detailed your *anticipated* immediate and intermediate outcomes and left room to record the actual outcomes as well. If the outcomes were less than expected, you

Process Measures:

- Describe what you have done, why, to whom, and for how long.
- Your action plan, derived from your component logic model, tracks the process.
- Each component outcome in your plan can and should be documented.

- Reviewed your action plan for faulty implementation;
- Considered the need to undertake a deeper needs assessment to enrich your understanding of participant readiness; and
- Consulted with the program developer or other experts regarding adaptation issues.

Process Evaluation

Process evaluation quantifies as well as qualitatively describes, what you have done (the activity or program), to whom (how many in each group and how consistently), for how long (hours, weeks, months, years), and how smoothly. A process evaluation also describes how it was done and why it was done that way. Your component logic model maps—and your action plan tracks and documents—each aspect of the process, such as participant and implementer characteristics, attendance, implementation issues, etc.

The importance of process evaluation to the field is often underestimated. For example, program implementers report the number of youth in after-school programs, or families in parenting programs they served without addressing one of the most important issues in program implementation and evaluation: participant attrition. Attendance history and the outreach methods used to attract and keep difficult-to-reach populations as active participants is a key issue in the prevention field.

Participation numbers alone may not show enough information. For instance, a “community night out,” co-sponsored by a coalition, may attract hundreds of families. Beyond knowing that 400 people attended, would you not also want to know how the “community night out” fit into a broader coalition strategy and what type of follow-up activities might build upon that event?

This type of information adds to the knowledge base of program developers. It also helps you and other practitioners learn more about the programs you are considering. Think about how other practitioners may benefit from your experience, especially when your collaborators document a difficulty with the implementation of an evidence-based program and the subsequent resolution of that problem. Tracking the causes of failures, as well as successes, helps increase the knowledge base for substance abuse prevention overall.

Remember that your action plans are the vehicle for recording all pertinent process information. They should be as detailed as necessary. If you are managing a coalition, your evaluation will be greatly enhanced by the extent to which you receive process evaluations from each of your partners. As with immediate and intermediate outcomes, the process measures are recorded during the implementation phase.

Long-Term Program Outcomes

The baseline measures that you established for the general substance abuse problem in your needs and resources assessment are measured again after all program activities are completed to ascertain your long-term outcomes.

- If possible, the same measures that were made at the completion of the program are repeated 12 and 18 months later to demonstrate sustainable outcomes, or long-term outcomes.
- If you are part of a coalition or a community partnership, your long-term outcomes are changes in the general substance abuse problem that caused your concern. These are broader in scope than the outcomes of the individual collaborators. The prevention activities of your coalition partners are “components” of your coalition’s overall logic model. Their long-term outcomes are your immediate or intermediate outcomes.
- The change that you have measured in your general substance abuse problem is documented on your logic model and/or action plan.
- Be sure to supplement your report to the community with these long-term impacts.

PATHWAYS is an evaluation process from start to finish. Your completed logic models and accompanying action plans should be an excellent outline for your evaluation report.

Getting Help from Expert Evaluators

The resources (time, money, people) you have available will influence the extent of your involvement in developing and executing an evaluation plan. Pre-planning for this step should come as you develop your implementation plan and assemble your evaluation team. Balancing your expectations (and those of others) with what is realistic and manageable can be difficult. You will need to consider the following:

- **Time.** Whose time and how much is available to work on evaluation? What priority will evaluation have in your overall workload? Involving community members is a way to spread the workload, but it may require additional time for preparation or training.
- **Money.** Some activities require financing. For example, what financial resources are available to print questionnaires, pay for postage, reimburse participants, analyze the data?
- **Expertise.** What outside expertise will you need to assist with evaluation? Do you have the necessary expertise to construct instruments or analyze the data? Or, are there experienced people with knowledge of your program who can train you in the skills needed? Would the involvement of an independent evaluator increase the evaluation's credibility?

Prevention practitioners, and this includes coalitions, often have neither the inclination nor the time to produce a credible evaluation on their own. The assistance of an evaluator attuned to, and practiced in, the art and science of systematic outcome evaluation is essential. Sometimes the biggest challenge to getting useful evaluation results is finding an evaluator who understands your program and with whom you can work comfortably.

How do you find expert evaluators?

- Check with universities, research institutes, or consulting firms;
- Ask other prevention groups/organizations for recommendations;
- Consult with representatives from your State agency who are responsible for administering the Federal substance abuse block grant funds;

- Call the Center for the Application of Prevention Technologies (CAPT) in your region for suggestions, or consult SAMHSA's CSAP project officer assigned to your State.
- Take an introductory course in the basic concepts relative to outcome evaluation (and earn CEUs) to make you a better consumer of evaluation services. (Evaluation courses are available at www.preventionpathways.samhsa.gov.)

Fortunately, if you have followed the process in PATHWAYS, you have reduced the time and effort that must be spent by an evaluator to produce a credible evaluation. The PATHWAYS process is data-driven and analysis oriented. Since you have been a partner in the process, you have already identified and minimized the tasks requiring expertise beyond your organization's capacity. And, you have been using the ongoing evaluation process to keep program staff and key stakeholders engaged in the program's success, so that unwelcome surprises are unlikely.

How Can You Be Sure of Your Conclusions?

If you selected an evidence-based program and implemented it well, chances are you will have positive outcomes based on your expectations. But even evidence-based programs are subject to variable results, as suggested in the three scenarios below:

Scenario A

You were able to select an evidence-based program that matched your needs, and you implemented it with nearly 100 percent fidelity. Under such conditions, since your theory, or theories, of change fit the changes intended by the program design, you may have been able to duplicate the program's outcomes almost perfectly.

Because of the congruence between your theory-based objectives and those of the program(s) you selected, you have no reason to believe that extenuating circumstances or happenstance caused the outcomes. The program developer took care of that during his/her extensive pilot testing. It is likely that your objectives (immediate and intermediate outcomes) have been met, and you have every expectation that your long-term outcomes—reduction in substance abuse for this population—will also occur.

Scenario B

You selected an evidence-based program but introduced several adaptations. Even though your adaptations were done carefully and thoughtfully, and were fully documented with strict adherence to your underlying factors and theories of change, you cannot be absolutely sure that the outcomes you obtained resulted from the program and not from extenuating circumstances.

To ensure that the outcomes secured were a direct result of the program (with its adaptations), a carefully matched comparison group, who received little or no services, was selected. At each point that you took measures of your target group, you took similar measures of your comparison group. Similar outcomes from both groups lead you to believe that the outcomes were not solely a result of the program but of other factors as well. If you see the significant outcomes you desire from your defined population, but do not see these outcomes in the comparison group, you can feel reasonably comfortable about attributing the outcomes to your program(s).

Scenario C

You selected an evidence-based program and have made several adaptations, but you do not have the capacity to set up a comparison or control group or cannot find one that has not already been exposed to significant substance abuse prevention programs.

Because of the complexity and time involved, this is the point where you might decide to seek outside assistance to ensure that the rigor you have exercised in your evaluation makes a compelling case that your program has achieved positive outcomes.

Even if you have followed the PATHWAYS process rigorously, you will not be able to make a causal claim for your selected program unless you are in the Scenario A category and have implemented an effective or model program. However, you may have sufficient documentation to demonstrate that your findings provide compelling evidence of program success.

Determining Sustainability

What happens after the program has been implemented and the follow-up activities described above have occurred? Consider the program's *sustainability*. Sustainability means that a program is likely to continue over a period of time, and there are resources to support it.

First, of course, you must determine if the program *should* be sustained. Changes in circumstances, staff, and community needs might suggest that this program is no longer a good “fit” for your defined population or broader community. Perhaps the desired outcomes were not achieved, and a re-evaluation of the needs and resources assessment suggests that program selection was faulty. Perhaps there have been changes in your population, place, or policy of interest that reduce the need for the program or that call for a different intervention altogether.

Chances are, however, because of the care with which you selected the program, and the ongoing evaluative process that enabled you to make adjustments to achieve desired outcomes, you will want to sustain a successful program. Continuing a successful program makes sense for several reasons:

- Ending a program that achieves positive results is counterproductive, if the problem for which it was chosen still exists.
- Creating a program requires significant start-up costs that can be amortized over future years if the program is continued.
- Implementing programs that are successful but not sustainable may jeopardize community support for future efforts.

Sharing the findings from your evaluation with key stakeholders in your community may ultimately be the most important thing you can do to make the case for sustaining a successful program.

Communicating Outcomes

As you implement and evaluate the objectives in your programmatic effort, you will also need to create awareness of, and support for, your efforts by the broader community. A strategic communication plan is an invaluable tool for planning and communicating your needs and successes to the community and to community stakeholders at all levels. A strategic communication plan can help you

- Identify the key groups and members of your community who can assist in carrying out and sustaining your efforts to effect communitywide change;
- Divide these groups and individuals into audience segments that you can target with messages carefully tailored to their interests and concerns;
- Identify communication venues (letters, newsletters, newspaper, radio, TV, billboards, door hangers, etc.) that will cost-effectively reach each audience segment;
- Establish expected measurable outcomes so you can ascertain if you are reaching your target audiences.

As you work to deliver your messages to various key audiences, be sure to craft interesting messages, especially those that put a human face on your successful outcomes, not just a summary of evaluation data. Yes, the data is important. The community does want to know the facts and figures of substance abuse reduction and prevention. However, prevention success stories that tell how your program affected specific participants can be a powerful tool for educating key stakeholders who can champion your efforts with funders and other community groups. These stories let everyone know that prevention works and is a vital community activity.

In Summary

Communities and funders today want results. They want *outcomes*. And you want to demonstrate that your program works, that the changes taking place are meaningful and do justice to your efforts. The good news is that if you followed the steps outlined in PATHWAYS, you are likely to see measurable outcomes. You will have empirical evidence that what you are doing is accomplishing what you intended.

Look again at the steps for the evaluation component of this process. There are many potential benefits associated with employing the recommendations in this component. Evaluation will be an ongoing, dynamic, collaborative process. Evaluation expectations will be clear and appropriate. Information will steer future program development. Using a structure for collaborative evaluation, your coalition can expect to strengthen its interventions and amass solid evidence of its effectiveness—for your future programming and for the field as a whole.

In addition, by following this process, you will be able to ensure that your program is accountable to those it is serving—the community at large and those who are providing funding. The process of evaluating your program in a continuous fashion not only allows you to document measurable outcomes, but also to make necessary adjustments, direct the future of your program, and make it sustainable.

SAMHSA Resources

SAMHSA-related Web sites:

Center for Substance Abuse Prevention/National Center for the Advancement of Prevention
<http://preventionpathways.samhsa.gov/>

Centers for the Application of Prevention Technologies: www.captUS.org

SAMHSA model programs Web site, evaluation information: www.modelprograms.samhsa.gov/

Evaluation technical assistance: <http://preventionpathways.samhsa.gov/eval/default.htm>

A number of useful technical assistance bulletins are available through the National Clearinghouse for Alcohol and Drug Information (NCADI), P.O. Box 2345, Rockville, MD 20847. A full list is available at <http://store.health.org/>. Of particular interest:

Evaluating prevention projects and programs

Cultural competence series

Guide to risk factor and outcome instruments for youth substance abuse prevention program evaluations

Measurements in prevention: A manual on selecting and using instruments to evaluate prevention programs

Resources and References

Annie E. Casey Foundation. (1995). *Getting smart, getting real: Using research and evaluation information to improve programs and policies* [Online report]. Available: www.aecf.org/publications/getsmart/aecget.htm

Bureau of Justice Assistance Evaluation Web site is designed to provide a variety of resources for evaluating criminal justice programs: www.bja.evaluationwebsite.org/

Centers for Disease Control and Prevention (CDC). (1999). *Framework for program evaluation in public health* [Online]. Available: www.cdc.gov/mmwr/preview/mmwrhtml/rr4811a1.htm

Community Toolbox, specifically: Our evaluation model: Evaluating comprehensive community initiatives: http://ctb.lsi.ukans.edu/tools/EN/section_1007.htm

InnoNet offers evaluation questions, indicators of success and strategies for collecting quantitative and qualitative data: www.innonet.org/

McNamara, C. *Basic guide to program evaluation* [Online as part of The Free Management Library]. Available at: www.mapnp.org/library/evaluatn/fnl_eval.htm

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